

**First Baptist Church of Sparta  
VBS Enrollment Card**

202 South Main St.  
Sparta, NC 28675  
(336) 372-8446

SM Med LG X-LG  
Circle T-Shirt Size

NAME of Child:

PARENT'S NAME (or Guardian):

ADDRESS

Street Address :

CITY / STATE / ZIP CODE

MAILING ADDRESS: *(if different)*

PHONE *(easiest access to)*:

E-MAIL Address

**AGE INFORMATION:**

DATE OF BIRTH:

LAST GRADE COMPLETED:

**MEDICAL INFORMATION OR SPECIFIC ALLERGIES WE NEED TO KNOW**  
**(foods or other):**

**IN AN EMERGENCY, CONTACT:**

NAME:

PHONE:

**CHILD PICK UP INFORMATION (if other than a parent) or Name of Daycare:**

NAME:

PHONE:

**DO YOU NEED TRANSPORTATION ?  YES  NO**

**ADDRESS:**

**ENROLLED IN SUNDAY SCHOOL?  YES  NO**

**CHRISTIAN?  YES  NO**

**MEMBER OF A CHURCH?  YES  NO**

**NAME OF CHURCH**

**CITY**